**CONTROLLED SUBSTANCES BIENNIAL INVENTORY FORM**

Principal Investigator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Biennial Inventory is a requirement of the Federal Drug Enforcement Administration ([21 CFR 1304.11](https://www.deadiversion.usdoj.gov/21cfr/cfr/1304/1304_11.htm)). Please list all Controlled Substances in possession as of the open of business on **April 10, 2025**. List all containers as separate line items. Please only include original containers as delivered – do not include containers of diluted or manipulated material. Add more lines if needed.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Line item | Controlled Substance  *(ketamine, pentobarbital)* | Product Name  *(Ketaset, Fatal-Plus)* | DEA schedule  *(II-V)* | Strength  *(ex - mg/mL, %)* | Finished form *(liquid, crystal, powder)* | Container ID  *(from use log)* | Container Size  *(ex – 10g, 1mL)* | Remaining Amount  *(ex – 5.2g, 0.5mL)* |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |

Number of completed line items in table: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (write “Zero” if none)

**By signing below,** I have verified the information listed here represents the actual amount of controlled substances existing in inventory as of the opening of business on **April 10, 2025** (Biennial Inventory Date).

**PI/Designee signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PI/Designee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

For a list of Controlled Substances visit: <https://www.deadiversion.usdoj.gov/schedules/orangebook/c_cs_alpha.pdf>

\* Measure in weight (powder or crystals) or volume (liquids) or number of units (tablets or capsules). For opened containers: If the substance is listed in Schedule I or II, make an exact count or measure of the contents. If the substance is listed in Schedule III, IV or V, make an estimated count or measure of the contents unless the container holds more than 1,000 tablets or capsules, in which case an exact count must be made.

\*\* Finished Form refers to the strength and form of the item as commercially prepared.

*For Controlled Substance Program Administrator*

|  |  |  |  |
| --- | --- | --- | --- |
| *DEA Registration #* |  | *CSUA #* |  |
| *Registration Address* |  | *Storage Location* |  |